

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/419,019	10/15/99	426	1761	163.1239USD1

APPLICANT  
TIMOTHY A. GUTZMANN, EAGAN, MN; BRIAN J. ANDERSON, ROBBINSDALE, MN;  
PAMELA J. REED, ST PAUL, MN; BRUCE R. CORDS, INVER GROVE HEIGHTS, MN;  
LAWRENCE A. GRAB, WOODBURY, MN; EDWARD H. RICHARDSON, COLUMBIA HEIGHTS,  
MN.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A DIV OF 09/137,242 08/20/98 (=)

*Yes ME*

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

*No ME*

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

*No ME*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/09/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPEN CLAIMS
Verified and Acknowledged	<i>ME</i> Examiner's Initials	Initials	MN	0	24	4

ADDRESS  
MERCHANT GOULD SMITH EDELL  
WELTER & SCHMIDT  
3100 NORWEST CENTER  
90 SOUTH SEVENTH STREET  
MINNEAPOLIS MN 55402-4131

TITLE  
TREATMENT OF ANIMAL CARCASSES

FILING FEE RECEIVED	FEEs: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ex <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$910		